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R. Writie

COVER LETTER

TO: Amendment Section

Division of Corporations

SUBJECT: ARTICLES OF DISSOLUTION UNK TOBLEOM, IN
DOCUMENT NUMBER: N 11000002809
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Coeolina Garcia (Name of Contact Person)
(Table of Collect Policity
C6 Pro Bosiness
(Firm/Company)
479 NE 30th St 911
(Address)
Higmi Fl 33137.
(City/State and Zip Code)
For further information concerning this matter, please call:
CORDING GOICH at (786) 594 1269
(Name of Contact Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount:
\$\sqrt{35}\$ Filing Fee \(\text{Certificate of Status} \) Certificate of Status \(\text{Certified Copy} \) (Additional copy is enclosed) \$\text{S43.75}\$ Filing Fee & Certificate of Status & Certified Copy (Additional copy is enclosed)
MAILING ADDRESS:STREET ADDRESS:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF DISSOLUTION

Pursuant to section 617.1401, Florida Statutes, this Florida not for profit corporation submits the following Articles of Dissolution:

FIRST:	The name of the corporation as currently filed with the Florida Department of State:
	Unk to Bloom, INC
SECOND:	The document number of the corporation (if known): N 11 00002809
THIRD:	The file date of the articles of incorporation: 03/18/2011
FOURTH	The corporation has not commenced to conduct its affairs.
FIFTH:	No debts of the corporation remains unpaid.
SIXTH:	Adoption of Dissolution (CHECK ONE) (Note: Cannot be authorized by an incorporator if the corporation has directors)
	The dissolution was authorized by a majority of the directors:
	☐ The dissolution was authorized by an incorporator. ☐ The dissolution was authorized by a majority of the incorporators. ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐
	☐ The dissolution was authorized by a majority of the incorporators.
Signa	(By the chairman or vice chairman of the board, president or other officer- if directors have not been selected, by an incorporator- if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary) COLONIA ADELY (Typed or printed name of person signing)
	President (Title of person signing)

Filing Fee: \$35

Notice of Corporate Dissolution

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 617.1407, F.S.

This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Corporation: UNK to Bloom INC.
Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the Articles of Dissolution.
Description of information that must be included in a claim:
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)
445 Grand Bay Dr
Apt 1207
Kuy Biscayne, F1 33149
A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.
Printed Name of the Person Filing Calculated April April April Signature of the Person Filing Signature of the Person Filing